PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/647,408			ing Date 25/2003	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY 🛛				HER THAN	
FOR			NUMBER FILED		<u> </u>	NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A			N/A		·N/A			N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A			N/A		N/A			N/A		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A			N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(I))			minus 20 =		us 20 = *	•		x \$ =		OR	x \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =			•		x \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE	If the specification and draw sheets of paper, the applica is \$250 (\$125 for small enti additional 50 sheets or frac 35 U.S.C. 41(a)(1)(G) and			tion size fee due y) for each ion thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))													
* If the difference in column 1 is less than zero, enter *0" in column 2.								TOTAL			TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT	03/07/2007	CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 20		Minus	 20	= 0		X \$25 =	0	OR	x \$ =		
	Independent (37 CFR 1.16(h))	• 1		Minus	***3	= 0		X \$100 =	0	OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))										yn s		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
TOTAL ADD'L OR ADD'L FEE										ADD'L			
9	24 07	(Colum			(Column 2)	(Column 3)	_						
AMENDMENT .	,	CLAIN REMAIN AFTE AMENDN	NING R		HIGHEST NUMBER PREVIOUSL' PAID FOR	PRESENT Y EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
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M	Independent (37 CFR 1.16(h))	. 1		Minus	(3	= 0	1	100.00	/	OR	ૐ૦.જ		
EN	Application Size Fee (37 CFR 1.16(s))								1				
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TÖTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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